

### MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

#### FILED

#### BALLOT QUESTION COMMITTEE COVER PAGE

06 JUN - 2 PM 3: 34 AMENDED

	0 14 A	ARTICLLA DAGATOR	ς	F	OR OFF	ICIAI	USE ON	Ji V
Report must be legible, typed or printed in ink and signed by the treasurer or designated record keeper			rom: 1 ) Ma	à	04	To	12 3	1 0
Committee I.D. Number     137553		4. Committee's Mailing Ad 26017 Ronald	dress	Day	Year		do Day	y Yea
2. Committee Name		Roseville, MI	48066	58	6 <del>-</del> 777	′-52	05	
EXCELLENCE IN EDUCATION		Area Code and Phone ( Iff the address in this box i the Statement of Organiza official.	) s different fr tion, mail m	rom the	commit ent to the	tee m	ailing add Iress by t	dress or the filing
5. Treasurer's Name and Residential Address	<del></del>				<del></del>			
CARMEL HART 26017 RONALD AreROSEVILLE MI 48066 586-777-52	.05							
6. Treasurer's Business Address	7.	Designated Record Keeper's (If the committee has a Des	s Name and signated Re	Mailini cord Ke	g Addre. Seper)	šs		
Area Code and Phone( )	Area	Code and Phone ( )						
8. TYPE OF STATEMENT:	8c.	ANNUAL STATEMENT	8e. 🖾 🗚	MENDA STATE	MENT TO	CAN	PAIGN	<u>.                                    </u>
8a. TPRE-ELECTION		( <u>04</u> Coverage Year)	(Compl	ete Iter	n Aa Ah	80.8	i or afte	<b>)</b>
OR  8b.  POST- ELECTION	8d. i	QUALIFICATION OR	indicate w					
Pre-Election or Post-Election Statement relates to:  PRIMARY GENERAL	STAT	ON-QUALIFICATION EMENT (Required of -wide Ballot Question			Date o	i Disso	dution	
x SCHOOL SPECIAL	Com	nittees Only)		Month	Day		ear	~_
Date of Election: 12 6 04  Month Day Year	Dat	e of Qualification or Non- Qualification:	By checkir committee including la of residual 48 and the	ng this in has no ate filing tunds of Sumn	item, I consisted assets grees. must be nary Pag	artify the or out <u>Note:</u> report je.	hat the standing The disp led on So	debts, osition chedule
	Monte	n Day Year		<del></del>	<u></u>			<del></del>
A committee that does not have a Reporting Waiver must file all re Schedules. Direct contributions, in-kind contributions, loans, expert if any of the information listed in items 4, 5, 6, or 7 has changed six amendment to the Statement of Organization should accompany the or before the filling deadline of a required campaign statement.	nce the i	nformation was shown on the	committee, against fue	\$1,000 s State	Report	ing Wa	liver thre	shold.
		parger statement car not	De Walved.	_				<del></del>
<ol> <li>Verification: I certify that all reasonable diligence was used in the my knowledge and belief the contents are true, accurate and c</li> </ol>	prepara omplete	ation of this statement and att	tached sche	:dules (	if any) a	nd to t	he best o	of
Current Treasurer or Carmel S. Hart Designated Record Keeper		arnel Ha	rB_	Dat	е <u>6,</u> мой	/1/C	6 ay Y	ear



#### SUMMARY PAGE BALLOT QUESTION COMMITTEE

1. Committee I.D. Number 137553

2. Committee Name Excellence in Education

RECEIPTS		
3. Contributions	Column I This Period	Column II Cumulative for Election Cycle
a. Itemized Contributions(Schedule 4A, Column 6)	(3a.) \$ 4,785.00	Oditionative for Election Cycle
b. Uniternized Contributions		
(less than \$20.01 - no Schedule)	(3b.) \$ NOT APPLICABLE	
c. Subtotal of Contributions	(3c.) \$ 4,785.00	(18.) \$
4. Other Receipts (Schedule 4A-1, Column 6)	(4.) \$	(19.) \$
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3 c + Line 4)	(5.) \$ 4,785.00	
IN-KIND CONTRIBUTIONS		(20.) \$
6. In-Kind Contributions		
a. Itemized In-Kind Contributions (Schedule 4-IK, Column 7)	(6a.) \$ 4,086.46	
b. Unitemized (less than \$20.01 each - no Schedule)	(6b.) \$ NOT APPLICABLE	
7. TOTAL IN-KIND CONTRIBUTIONS	The state of the s	
(Add Line 6a + Line 6b)	(7.) \$ 4,086.46	(21.) \$
EXPENDITURES		
8. Expenditures		į
<ul> <li>a. Itemized Direct Expenditures ( Schedule 48, Column 7)</li> </ul>	(8a.) \$ 4,086.46	
b. Itemized Get-Out-The Vote (Schedule 4B-G, Column 6)	(8b.) \$	
<ul> <li>c. In-Kind Expenditures - Purchase of Goods or Services (Schedule 4B-2, Column 7)</li> </ul>	·	
· · · · · · · · · · · · · · · · · · ·	(8c.) \$	
d. Unitemized Expenditures (\$50.00 or less-no Schedule)	(8d.) \$	
e. Subtotal of Expenditures	(8e.) \$	(22.) \$
9. Independent Expenditures (Schedule 4B-1, Column 7)	(9.) \$	(23.) \$
10. TOTAL EXPENDITURES (Add Line 8e + Line 9)	(10.) s <u>4,086.46</u>	(24.) \$
IN-KIND EXPENDITURES  11. Total In-Kind Expenditures-Endorsements, Donations or		(24.)
Loans of Goods or Services (Schedule 48-2, Column 8)	(11.) \$	
DEBTS AND OBLIGATIONS	(11)	(25.) \$
<ol> <li>Debts and Obligations</li> <li>Owed by the Committee (Schedule 4E)</li> </ol>	/47~ \e	
b. Owed to the Committee (Schedule 4E)	(12a.)\$	
BALANCE STATEMENT	(12b.) \$	
13. Ending Balance of last report filed		
(Enter zero if no previous reports have been filed.)	(13.) \$ O . O#O# /	
<ol> <li>Amount received during reporting period (Line 5, Column I, Total Contributions &amp; Other Receipts)</li> </ol>	(14.) + 4.785.00	
15. SUBTOTAL Add lines 13 and 14	(15.) =4,785.00	
<ol> <li>Amount expended during reporting period (Line 10, Column I, Total Expenditures)</li> </ol>	(16.) - 4,086.46	<del></del>
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.)\$ 698.54	•
and the second s		_ <del></del>



# ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT OUESTION COMMITTE

1	Committee ( D. Number	137553
_	_	

Please enter continuors name and address al continuor is from an individual, enter last name first numbridale initial.	ame p Amount	7. Cumulative for Election Cycle for Ea
3. Contribution # 1 - Date or Receipt 11/24/04		Contributor (Through date of receipt)
Name:	,	
Roseville Principal Association		
Address: 17855 Common Rd Roseville, MI 48066 5. If over \$100.00 cumulative, please provide:	200.00	
The state of the s	200.00	
OccupationSmolover		:
Business Address		
Type of Contribution: X Direct Loan from a person Sund Research		
3. Contribution # 2 - Date of Receipt 11/24/04		
Name	15.00	,
Miglio, Barbara Address:	13.00	
26729 Kaiser Rosville, MI 48066		
or a contractive bisse blonds:		
Occupation Employer		
Business Address		
Type of Contribution: X Direct Loan from a person Fund Raiser	-	
3. Contribution #3 4 Date of Receipt 11/24/04		
Name:		
Young, Loretta		
35728 Devereaux Clinton Twp MI 48035	50.00	
OccupationEmployer		
usiness Address		
ype of Continbution: V Direct		
ype of Continbution: X Direct Loan from a person Fund Raiser  Continbution # 4 + Date of Receipt 12-2-04		
ame: JOHN KMENT	100.00	
	00100	
Idress 23061 PETERSBURG; EASTPOINTE, M. 48021	j	,
If over \$100.00 cumulative, please provide:	!	
ccupationEmployer		
siness Address		
pe of Contribution: Direct Loan from a person 💟 Fund Raiser		
Page Subtotail		
Grand Total of All Schedules 4A (Complete on last page of Schedule)	365.00	
	Enter this total	
	ender frag folgt	

enter this total on line 3a of Summary Page

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### ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1 Committee I.D. Number _	137553
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BALLOT QUESTION COMMITTEE  2. Committee Name Excell	encein Educa	tion
middle initial.	ö. Amount	7. Cumulative for Election Cycle for Eac Contributor (Through
- Date of Neceph 11724/04	!	date of receipt)
Name: Roseville Federation of School Administrators	:	
Address:		
18975 Church Street Roseville, MI 48066 5. If over \$100.00 cumulative, please provide:	200.00	
OccupationEmployer		
Business Address		
Type of Contribution: V Direct Loan from a person Fund Raiser		
Type of Contribution: Variety Loan from a person Fund Raiser  3. Contribution # 2 4. Date of Receipt 11/24/04	!	
Name:		<del></del>
Karen McGuire Address:		
11183 Bay Shore Court Clarkston, MI 48348 5. If over \$100.00 cumulative, please provide:	50.00	
Occupation Employer		
Business Address		
Type of Contribution: X Direct Loan from a person Fund Raiser	]	
3. Contribution # 3 4. Date of Receipt 11/26/04		
Name:	]	
Fire Extinguisher Sales and Service		
31551 Groesbeck Frager, MT 49006	F0.00	
5. If over \$100.00 cumulative, please provide:	50.00	
OccupationEmployer		
Business Address		
Type of Contribution: y Direct Loan from a person		
3. Contribution # 4 ÷ Date of Receipt 11/24/04		
Namo		
Wangrud, Ronald Address:		
53552 Oakview Shalber many MT 40015	100.55	
b. If over \$100.00 cumulative, please provide:	100.00	
OccupationEmployer		
Business Address		
ype of Contribution: X Direct Loan from a person Fund Raiser		
Page Subtotal)	400-00	<del> </del>
Grand Total of All Schedules 4A		

Enter this total on line 3a of Summary Page



#### MICHIGAN DEPARTMENT OF STATE

Bureau of Elections

# ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

1. Committee I.D. Number	137553
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Please enter contributors name and address. If contribution is from an individual, enter last name, first name.	<u>lence</u> in Edu	cation
	b. Amount	7. Cumulative for Election Cycle for Each Contributor (Through
3. Contribution # 1   - Date of Receipt 11/29/04	1	date of receipt)
Name: Greve, Ronald	į	
Address:	į	
48745 Valley Forge Macomb, MI 48044 5. If over \$100.00 cumulative, please provide:	250.00	
Occupation <u>Lawyer</u> <u>Employer</u> <u>Dinning</u> and Greve		
Business Address 25509 Kelly Rd Roseville MI 48066		
Type of Contribution: X Direct Loan from a person Fund Raiser  3. Contribution # 2 4. Date of Receipt 11/29/04		
3. Contribution # 2 4. Date of Receipt 11/29/04		
Name: Dinning, Douglas Address:	250.00	
3770 Lake Forest Drive Sterling Heights MI 48314 5. If over \$100.00 cumulative, please provide:		
Occupation Lawyer Employer Dinning and Greve		
Business Address 25509 Kelly Rd Roseville, MI 48066	1	
Type of Contribution: XDirect Loan from a person Fund Raiser  3. Contribution # 3  4. Date of Receipt 11/29/04		
3. Contribution #3 4. Date of Receipt 1.1 /20 /04	-	<del></del>
Name: Steenland, Joseph		
Address:	}	
31490 Kelly Rd Roseville, MI 48066 5. If over \$100.00 cumulative, please provide:	50.00	
OccupationEmployer		
Business Address		
Type of Contribution: X Direct Loan from a person Fund Raiser		
Type of Contribution: X Direct Loan from a person Fund Raiser  3. Contribution # 4 4 Date of Receipt 12/3/04		
Name: PTO Kaiser Elementary, Rosville Community Schools	250.00	
Address: 16700 Wildwood Roseville, MI 48066 5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: X Direct Loan from a person Fund Raiser		
Page Subtotal)  Grand Total of All Schedules 4A (Complete on last page of Schedule)	800.00	
_	Enter the total	

Enter this total on line 3a of Summary Page

Page \_ 3 of \_ 12\_



#### ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1 Committee I.D. Number 137553

BALLOT QUESTION COMMITTEE 2. Committee Name 13 years	la /	. •
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	lence in Fd:	7. Cumulative for Election Cycle for Each Contributor (Through
3. Contribution # 1		date of receipt)
Name: Comerica Bank (3354)		
Address: P.O. Box 75000 Detroit, MI 48275		
5. If over \$100.00 cumulative, please provide:	100.00	
OccupationEmployer		
Business Address		
Type of Contribution: X Direct Loan from a person Fund Raiser		
3. Contribution # 2 4. Date of Receipt 12/7/04		
Name: Roseville Federation on Teachers Local 1071	1,000.00	,
17063 East 10 Mile Rd Eastpointe, MI 48021		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Supri Baisse		
3. Contribution #3 4. Date of Receipt 12/7/04		
Name: Kepler, Irene	150.00	
Address: 27344 Leroy Street Roseville, MI 48066	150.00	
5. If over \$100.00 cumulative, please provide:		
Occupation Social Worker Employer Roseville Community Schools		
Business Address 18975 Church Street Roseville, MI 48066		
Type of Continuution: X Direct Loan from a person Fund Raiser		
Type of Contribution: X Direct Loan from a person Fund Raiser  3. Contribution # 4 4. Date of Receipt 12/9/Q4		
Name: DeFelice, Lisa		
Address:		
15437 Curtis Roseville, MI 48066 5. If over \$100.00 cumulative, please provide:	70.00	
OccupationEmployer		
Business Address		
ype of Contribution: X Direct Loan from a person Fund Raiser		
Page Subtotal) Grand Total of All Schedules 4A (Complete on last page of Schedule)	1,320.00	

Enter this total on line 3a of Summary Page



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#### MICHIGAN DEPARTMENT OF STATE Bureau of Elections

#### ITEMIZED CONTRIBUTIONS **SCHEDULE 4A BALLOT QUESTION COMMITTEE**

1 Committee I.D. Number \_\_\_\_137553

Please enter contributors name and address it contributors.	<u>сепеисе in Е</u>	ducation
Please enter contributors name and address. If contribution is from an individual, enter last name, first namedile initial.	ime ő. Amount	7. Cumulative for Election Cycle for Each Contributor (Through
3. Contribution # 1 4 Date of Receipt 12/9/04		date of receipt)
Name: J£J Michigan Inc.  Address: P.O. Box 680 Roseville, MI 48  5. If over \$100.00 cumulative, please provide:	500.00	
OccupationEmployer	İ	
Business Address	<u> </u>	
Type of Contribution: V. Disease		
3. Contribution #2 Loan from a person Fund Raiser		
Name: Claseman, Judy Address:	50.0	
21717 Lakeshire St. Clair Shores, MI 48081 5. If over \$100.00 cumulative, please provide:	30.00	<b>7</b>
OccupationEmployer		
Business Address		
Type of Contribution: X Direct Loan from a person Fund Raiser	-	3
3. Contribution # 3 4. Date of Receipt 12/20/04		
Name: PTO Dort Elementary - Roseville Community Schools		
16225 Dort, Roseville MI 48066 5. If over \$100.00 cumulative, please provide:	50.0	0
OccupationEmployer		
Business Address		
Type of Contribution: X Direct Loan from a person Fund Raiser		
3. Contribution # 4 4. Date of Receipt 12/29/04		
Name: PTO RJHS - Roseville Community Schools Address: 16250 Martin Rd. Roseville, MI 48066 5. If over \$100.00 cumulative, please provide:	50.0	00
OccupationEmployer	}	
Business Address		
Type of Contribution: X Direct Loan from a person Fund Raiser		
Page Subtotal)		
Grand Total of All Schedules 4A (Complete on last page of Schedule)	650.0	<u>_</u>
ana 5 of <b>/3</b> .	Enter this total on line 3a of Summary Page	



### ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number

131553

BALLOT QUESTION COMMITTEE 2. Committee Name EXCCL	sence in	/ DUCATION
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through
3. Contribution # 1 4. Date of Receipt 12-2-04	100 00	date of receipt)
Name: MICHAEL LA FEVE	100.00	
Address: 36610 25 MILERD; NEWBALTIMORE, MI 48047	1	
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer	<u> </u>	
Business Address	ŀ	
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 2 4. Date of Receipt /2 - 1-04		
Name: KAREN McGUIRE	50,00	
Address: 11183 BAY SHORE CT; CLARKSTON, MI 48348		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution:   Direct Loan from a person Fund Raiser		
3. Contribution #3 4. Date of Receipt 12 -2 -0 4		
Name: THERESA STRONG	15,00	
Address: 15150 KEPPEN; ALLEN PARK, MI 48101		
5. If over \$100.00 cumulative, please provide:		
Occupation Employer	į	
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 4 4. Date of Receipt /2 -2 -04	15 6	
Name: ROSELIARIE SHITH	15,00	
Address: 27521 BOHN; ROSEVILLE, MI 48066		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution:   Direct Loan from a person Fund Raiser		
Page Subtotal) Grand Total of All Schedules 4A (Complete on last page of Schedule)	180,00	

Enter this total on line 3a of Summary Page

Page <u>**6**</u> of <u>12</u>



### ITEMIZED CONTRIBUTIONS SCHEDULE 4A

BALLOT QUESTION COMMITTEE 2. Committee Name	XCELLENCE	IN EDUCATION
middle initial.	ame, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through
3. Contribution # 1  A. Date of Receipt 12-2-04  Name: IVANA PITRUZZ-ELLO	10,00	date of receipt)
Address: 25535 ARLINGTON, ROSEVILLE MI 48066		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer	İ	
Business Address		
Type of Contribution: Direct Loan from a person		
Name: KA+4V MARTZ  4. Date of Receipt /2-2-04	10,00	
Address: 26151 BARBARA; ROSEVILLE, MI 48066		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer_		
Business Address	-	
Type of Contribution:   Direct   Loan from a person   Fund Raiser	- [	
3. Contribution # 3 4. Date of Receipt 12-1-04	50.00	
Name: TOM LUTOSTANSKI	50,00	
Address: 36532 IDAHO DR; STERLING HETS, M, 483	3/2	
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution:   Direct   Loan from a person   Fund Raiser	-	
3. Contribution # 4 4. Date of Receipt /2-/-04	FAGO	
Name: ANDREA GLYNN	50,00	
Address: 1125 O'CONNOR; MARYSVILLE, MI 48040		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Eund Raiser		
Page Subtotal) Grand Total of All Schedules 4A	120,00	
(Complete on last page of Schedule)		

Enter this total on line 3a of Summary Page



#### ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COM

1. Committee I.D. Number

/37553

Please onter contribute 2. Committee	Name EXCELLENCE	IN COUCATION
Please enter contributors name and address. If contribution is from an individual, enter last middle initial.  3. Contribution #1	name, first name, 6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
4. Date of Receipt	50,0	
Name: Betty Kee		<i>'</i> U
Address: 1054 ANITA; GROSTE POINTE WOODS,	41 48236	
5. If over \$100.00 cumulative, please provide:	,	
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person	nd Raiser	
3. Contribution # 2 4. Date of Receipt	<del></del>	<del></del>
Name: CHARLES FELKER	50,60	0
Address: 53850 MEADOWVIEW LANE; NEW BALTI	MORE, HI	,
5. If over \$100.00 cumulative, please provide:	48047	
OccupationEmployer		
Business Address		,
Type of Contribution: Direct Loan from a person	d Raiser	
3. Contribution #3 4. Date of Receipt 12-L-CCL	<del>"</del>	
Name: MARTHA O'KRAY	25,00	0
Name: MARTHA O'KRAY, Address: 49849 HIDDEN VALLEY; MACCHE TWP, L	1, 48044	
5. If over \$100.00 cumulative, please provide:	,	
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person	Raiser	
3. Contribution # 4 4. Date of Receipt /2-6-04		3
Name: CAROLE QUADROZZI	25,0	0
Address: 56 BELLEVIEW; MT CHEMENS, MI	48043	
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution:   Direct   Loan from a person	d Raiser	
Page Su	ibtotal) 150,00	
Grand Total of All Schedu (Complete on last page of Sc	JIES 4A I	

Enter this total on line 3a of Summary Page



# ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTEE

Solution   Solution	Please enter contributors name and address 16 and 1	ence in	COUCAI/OU
Name: JUDY CHASEMAN Address: 2/7/7 LAKESHINE, S-CAALR SHORES .M. 4881  5. If over \$100.00 cumulative, please provide:  Occupation		6. Amount	Election Cycle for Each Contributor (Through
Address: 21717 LAKESHINE, G:CAALR SHORES, H148081  5. If over \$100.00 cumulative, please provide:  Occupation	4. Date of Receipt 782 - 009	50.00	
Docupation	Name: JUDY CHISEMAN	30100	
Docupation	Address: 0/117 LAKESHINE, ST. CLAIR SHORES MILLIAN		
Business Address Type of Contribution:   Direct   Loan from a person   Fund Raiser    3. Contribution # 2   4. Date of Receipt   11-30-04    50 000    S. If over \$100.00 cumulative, please provide:    Cocupation   Employer    Business Address   1/225   Web   1/2    3. Contribution # 3   4. Date of Receipt   1/2-30-04    50 100    Address: 3 f 36 f Kelmar   Chinton Turp   H   48036    5. If over \$100.00 cumulative, please provide:    Cocupation   Employer    Business Address   Type of Contribution:   Direct   Loan from a person   X Fund Raiser    50 100    Address: 3 f 36 f Kelmar   Chinton Turp   H   48036    5. If over \$100.00 cumulative, please provide:    Cocupation   Employer    Business Address    Type of Contribution:   Direct   Loan from a person   X Fund Raiser    50 100    50 100    Fund Raiser    50 100    Fund Raiser    50 100    50 100    Fund Raiser    50 100    Fund Raiser    Fun	5. If over \$100.00 cumulative, please provide:		
Business Address Type of Contribution:   Direct   Loan from a person   Fund Raiser  3. Contribution # 2   4. Date of Receipt   11-30-04   50 / 00  Address:   1/225   WOODVIKW   CT   CLINTON TWP   M,	OccupationEmployer		
3. Contribution # 2  4. Date of Receipt 11-30-04  Name: DAN SCHULTZ  Address: #1225 WCODVKW CT; CL/WTON TWP, HI 46036  5. If over \$100.00 cumulative, please provide:  Occupation			
A. Date of Receipt 11-30-04 50.00  Name: DAN SCHULTZ  Address: \$\frac{1}{2} \( \) \$\text{MoDDVKW} CT; \$\text{CL/NTON TWP}, \text{H} \) \$\text{4038} \$  5. If over \$100.00 cumulative, please provide:  Occupation	Type of Contribution: Direct Loan from a person		
Address: #1225 Weodykew CT; CLINTON TWP, HI 46036  5. If over \$100.00 cumulative, please provide:    Direct	3. Contribution # 2 4. Date of Receipt 1/- 30-11		
Address: #1225 Woodview CT; CLINTON TWP, HI 48038  5. If over \$100.00 cumulative, please provide:  OccupationEmployer	Name: DAN SCHULTZ	50,00	
S. If over \$100.00 cumulative, please provide:  Occupation			
Business Address  Type of Contribution:	5. If over \$100.00 cumulative, please provide:		
Business Address  Type of Contribution:	OccupationEmployer		
3. Contribution #3 Name: WAYNE DHUSON  Address: 3 6 358 KELMAR; CLINTON TWP, H, 46036  5. If over \$100.00 cumulative, please provide:  Occupation			
3. Contribution #3 Name: WAYNE BHUSON Address: 3 \( \frac{3}{5} \) KEMAR', CLINTON TWP, HI 48036  5. If over \$100.00 cumulative, please provide:  Occupation	Type of Contribution: Direct Loan from a person		
Address: 3 \$358 KELMAR; CLINTON TWP, HI 46036  5. If over \$100.00 cumulative, please provide:  OccupationEmployer  Business Address Type of Contribution:	3. Contribution #3 / 4. Date of Receipt //- 30 - 04		
Address: 3 6 3 5 8 KELMAR; CLINTON TWP, MI 46036  5. If over \$100.00 cumulative, please provide:  Occupation	Name: WAYNE DHUSON	50,00	
5. If over \$100.00 cumulative, please provide:  Occupation	Address: 38358 KELMAR; CLINTON TWP, 41 48036		
Business Address  Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution # 4			
Business Address  Type of Contribution: Direct Loan from a person X Fund Raiser  3. Contribution # 4	<b>!</b>		
Type of Contribution: Direct Loan from a person Fund Raiser  3. Contribution # 4			
3. Contribution # 4  4. Date of Receipt //-30-04  Name: CATHERING MC PHERSON  Address: 1728 MANCHESTER, CROSSE PO/WTE WOODS, M1  5. If over \$100.00 cumulative, please provide:  OccupationEmployer  Business Address  Type of Contribution: Direct Loan from a person AFund Raiser  Page Subtotal)  Grand Total of All Schedules 4A		İ	
Name: CATHERINE Mc PHERSON  Address: 1728 MANCHESTER; CRASSE POINTE WOODS, M1  5. If over \$100.00 cumulative, please provide:  OccupationEmployer  Business Address Type of Contribution:	()		
5. If over \$100.00 cumulative, please provide:  OccupationEmployer  Business Address  Type of Contribution:	Name: CATHERINE MCPHERSON	50,00	
5. If over \$100.00 cumulative, please provide:  OccupationEmployer  Business Address  Type of Contribution:	Address: 1728 MAI) OUCCION, GONGE PONTE PONTE PONTE		
OccupationEmployer  Business Address  Type of Contribution:	5. If over \$100.00 cumulative, please provide:		
Business Address  Type of Contribution:	70.7		
Type of Contribution:   Direct Loan from a person Fund Raiser  Page Subtotal)  Grand Total of All Schedules 4A		İ	
Page Subtotal) Grand Total of All Schedules 4A	Type of Contribution: Direct		
Grand Total of All Schedules 4A	Pund Raiser	20000	
LODDONETE ON Jast hade of Cohodula)		X00,00	

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Page 9 of 12



## ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number

131553

Please enter contributors name and the Columnities 2. Committee Name ACCAL	LEADE 1	N EDUCATIO
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for
		Election Cycle for Each Contributor (Through
3. Contribution # 1 4. Date of Receipt / 2 - 3-04	~	date of receipt)
Name: FAYE BUCCI	50,00	
Address: 48396 LAKE VALLEY; SHELBY TWP, M, 48317		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	1	
3. Contribution # 2		
Name: MARK BLASZKOWSKI	50,00	
Address: 14569 ROYAL; STERLING HETS, MI 48312		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address	!	
Type of Contribution:   Direct Loan from a person Fund Raiser		
3. Contribution # 3 4. Date of Receipt /2 -/-0 4	F"A - A	
Name: LAURIE KINCH	50,00	
Address: 22757 IRWIN RD; ARMADA, M, 48005		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser	j	
4. Date of Receipt /2-2-04		
Name: PETER HEDEMARK	50,00	
Address: 19937 WOODCREST; HARRER WOODS, M. 48225		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Eund Raiser		
Page Subtotal)	200,00	
Grand Total of All Schedules 4A (Complete on last page of Schedule)		

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# ITEMIZED CONTRIBUTIONS SCHEDULE 4A

1. Committee I.D. Number / 37553

Places extra extribute Vame 2. Committee Name 2. Committee Name 2.	LENCE 1	N LDUCATTU
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution #1  Name: SHARON HOLMES  4. Date of Receipt /1-30-04	50,00	date of receipt)
Address: 51734 INDIAN DIE. DR.; MACOMB. HI, 48042		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution # 2  4. Date of Receipt //- 30-84	50,00	
Name: DENVIS ALEXANDER	00100	
Address: 25981 ACACIA; SOUTHPIELD, MI 48039		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
3. Contribution #3 4 Date of Receipt 1) - 1-612	EA AO	
Name: DAVID Rice	50,00	
Address: 32833 CAMBRIDGE; WARREN, M. 48093		
5. If over \$100.00 cumulative, please provide:	1	
OccupationEmployer		
Business Address		
Type of Contribution:   Direct Loan from a person Fund Raiser		
3. Contribution # 4 4. Date of Receipt	5000	
Name: PAUL SCHUMMER	50,00	
Address: 21601 WOODBRIDGE; STCAAIR SHORES, M.		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer	ł	
Business Address		
Type of Contribution: Direct Loan from a person Fund Raiser		
Page Subtotal)	200,00	
Grand Total of All Schedules 4A (Complete on last page of Schedule)	Ţ.	

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#### MICHIGAN DEPARTMENT OF STATE

**Bureau of Elections** 

# ITEMIZED CONTRIBUTIONS SCHEDULE 4A BALLOT QUESTION COMMITTE

1. Committee I.D. Number \_

137553

BALLOT QUESTION COMMITTEE 2. Committee Name CLEC	LENCE IN	DUCATION
Please enter contributors name and address. If contribution is from an individual, enter last name, first name, middle initial.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through
3. Contribution # 1 4. Date of Receipt 12 10 9		date of receipt)
Name: JEANNE PETERSEN	50,00	
Address: 5010 ROCKDALE CT; STERLING HETS, MI		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer	į	
Business Address		
Type of Contribution: Direct Loan from a person		
3. Contribution # 2 4. Date of Receipt 12 -) - 1	774 428	<del></del>
Name: DAN CROW	50,00	
Address: 1/285 HANOVER DR; WARREN, M. 48093		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution:   Direct Loan from a person Fund Raiser		
3. Contribution #3 4. Date of Receipt /2-3-04	F. 6 (1)	
Name: MICHAEL ANTOINE	50,00	
Address: 12109 PARKSIDE CT; WASHINGTON, TWP, HI		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		!
Type of Contribution:   Direct Loan from a person Fund Raiser		
3. Contribution #4 4. Date of Receipt 12-b-04	TA 00	
Name: JON STEENLAND	50,00	
Address: 53039 BAYBERRY; HAROMB, MI 48042		
5. If over \$100.00 cumulative, please provide:		
OccupationEmployer		
Business Address		
Type of Contribution:   Direct   Loan from a person   Fund Raiser		
Page Subtotal)	200.00	
Grand Total of All Schedules 4A (Complete on last page of Schedule)	4,785.00	
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### MICHIGAN DEPARTMENT OF STATE BUREAU OF ELECTIONS

#### ITEMIZED IN-KIND CONTRIBUTIONS SCHEDULE 4-IK BALLOT QUESTION COMMITTEE

1. Committee I. D. Num	ber <u>137553</u>	
2. Committee Name	Excellence i	n Education

Name and Address from whom received  If contribution is from an individual, please enter last name first.	4. Type of In-Kind Contribution (Check applicable box) 5. Date of Receipt 6. Name & Address of Vendor from whom goods or services were purchased	7. Amount or Fair Market Value	8. Cumulative for Election Cycle (Through date in Item 5)
Contribution #1 Name and Address: Rebecca Vasil c/o Roseville Community Schools 18975 Church St. Roseville, MI If over \$100.00 cumulative, please provide: 48066 Occupation Deputy Superintendent Employer Roseville Community Schools Business Address 18975 Church St, Roseville MI Fund Raiser 48066	4. Loan endorsement or guarantee  Goods Donated or loaned Services Donated  Goods or Services Purchased by Others  Goods or Services Purchased by Others - LOAN  Description room rental  5. DATE OF RECEIPT: 11/10/04  6. VENDOR NAME & ADDRESS: Roseville Rec Center  18185 Sycamore Roseville MI 48	\$20.00	\$20.00
Contribution #2 Name and Address: Rebecca Vasi1 see above  If over \$100.00 cumulative, please provide: Occupation see above Employer  Business Address  Fund Raiser	4. □ Loan endorsement or guarantee □ Goods Donated or loaned □ Services Donated □ Goods or Services Purchased by Others ☑ Goods or Services Purchased by Others - LOAN Description □ lapel pins  5. DATE OF RECEIPT: □ 11/9/04  6. VENDOR NAME & ADDRESS: The Education People Inc. 334 Underhill 4CD, Yorktown Hts	\$481.14	\$501.14
Contribution #3 Name and Address:  Rebecca Vasil see above  If over \$100.00 cumulative, please provide:  Occupation  Employer see above  Business Address  Fund Raiser	4.	\$20.00	\$521.14
	Page Subtotal Grand Total of all Schedules 4-IK (Complete on last page of Schedule)	\$521.14	

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